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Bib Data Sheet

CONFIRMATION NO. 2748

<b>SERIAL NUMBER</b> 09/910,442	<b>FILING DATE</b> 07/20/2001 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> NCX-003.01
<b>APPLICANTS</b> Rajagopal Bakthavatchalam, Branford, CT; Alan Hutchison, Madison, CT; Robert W. DeSimone, Durham, CT; Kevin J. Hodgetts, Killingworth, CT; James E. Krause, Madison, CT; Geoffrey G. White, Guilford, CT;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/280,223 03/30/2001 AND CLAIMS BENEFIT OF 60/230,726 09/07/2000 AND CLAIMS BENEFIT OF 60/219,529 07/20/2000 <i>KM</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>NONE</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 09/14/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC § 9 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>KH/MS</i> Initials		STATE OR COUNTRY CT	SHEETS DRAWING 198	INDEPENDENT CLAIMS 17
<b>ADDRESS</b> 025181				
<b>TITLE</b> Capsaicin receptor ligands				
<b>FILING FEE RECEIVED</b> 2873	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	